

## Commonwealth of Pennsylvania - Campaign Finance Report

(Note: This report must be clear and legible. It should be typed)

Filer Identification Number	Report Filed By (Mark X)	Candidate	Committee	<input checked="" type="checkbox"/>	Lobbyist
Name of Filing Committee, Candidate or Lobbyist	COMMITTEE TO ELECT JIM WINARSKI (CITY COUNCIL)				
Street Address	1140 E 31ST ST				
City	ERIE	State	PA	Zip Code	16504

Type of Report (Place x under report type)

1- 6 <sup>th</sup> Tuesday Pre-Primary	2- 2 <sup>nd</sup> Friday Pre-Primary	3- 30 Day Post Primary	4- 6 <sup>th</sup> Tuesday Pre- Election	5- 2 <sup>nd</sup> Friday Pre- Election	6- 30 Day Post Election	7- Annual	Special 2 <sup>nd</sup> Friday Pre-Election	Special 30 Day Post-Election
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Date Of Election (MM/DD/YYYY)	11/7/2017	Year	2017	Amendment Report	<input type="checkbox"/>	Termination Report	<input type="checkbox"/>	<input type="checkbox"/>

Summary of Receipts and Expenditures	From Date	To Date	For Office Use Only
	6/06/2017	10/23/2017	
A. Amount Brought Forward From Last Report	\$	2006.28	2017 OCT 27 AM 10:55 ERIE COUNTY VOTER REGISTRATION 527
B. Total Monetary Contributions and Receipts (From Schedule I)	\$	0	
C. Total Funds Available (Sum of Lines A and B)	\$	2006.28	
D. Total Expenditures (From Schedule III)	\$	1040.00	
E. Ending Cash Balance (Subtract Line D from Line C)	\$	966.28	
F. Value of In-Kind Contributions Received (From Schedule II)	\$		
G. Unpaid Debts and Obligations (From Schedule IV)	\$		

## Affidavit Section

Part I- If this is a **Committee** report, treasurer sign here. If this is a **Candidate** report, candidate sign here.

I swear (or affirm) that this report, including the attached schedules on paper, is to the best of my knowledge and belief true, correct and complete.

Sworn to and subscribed before me this

27<sup>th</sup> day of OCTOBER 20 17  
 Laurie A Watson  
 Signature

My Commission expires 2-2-19  
 MO. DAY YR.

Theresa Humes  
 Signature of Person Submitting report  
 Theresa Humes  
 Printed Name  
 814 864-7428  
 Area Code Daytime Telephone Number  
 COMMONWEALTH OF PENNSYLVANIA  
 NOTARIAL SEAL  
 LAURIE A WATSON  
 Notary Public  
 CITY OF ERIE, ERIE COUNTY  
 Commission Expires Feb 2, 2019

Part II- If this is a report of a **Candidate's Authorized Committee**, candidate shall sign here.

I swear (or affirm) that to the best of my knowledge and belief this political committee has not violated any provisions of the Act of June 3, 1937 (P.L. 1333, NO.320) as amended.

Sworn to and subscribed before me this

27<sup>th</sup> day of OCTOBER 20 17  
 Laurie A Watson  
 Signature

My Commission expires 2-2-19  
 MO. DAY YR.

James F. Winarski  
 Signature of Candidate  
 JAMES F. WINARSKI  
 Printed Name  
 814 806-7228  
 Area Code Daytime Telephone Number  
 COMMONWEALTH OF PENNSYLVANIA  
 NOTARIAL SEAL  
 LAURIE A WATSON  
 Notary Public  
 CITY OF ERIE, ERIE COUNTY  
 Commission Expires Feb 2, 2019

SCHEDULE I  
**Contributions and Receipts**  
Detailed Summary Page

<b>Filer Identification Number</b>	COMMITTEE TO ELECT JIM WINARSKI (CITY COUNCIL)		
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<b>1. Unitemized Contributions and Receipts-\$50.00 or Less per Contributor</b>			
Total for the reporting period	(1)	\$	0

  

<b>2. Contributions of \$50.01 to \$250.00 (From Part A and Part B)</b>			
Contributions Received from Political Committees (Part A)		\$	
All Other Contributions (Part B)		\$	
Total for the reporting period	(2)	\$	

  

<b>3. Contributions Over \$250.00 (From Part C and Part D)</b>			
Contributions Received from Political Committees (Part C)		\$	
All Other Contributions (Part D)		\$	
Total for the reporting period	(3)	\$	

  

<b>4. Other Receipts-Refunds, Interest Earned, Returned Checks, ETC. (From Part E)</b>			
Total for the reporting period	(4)	\$	0
Total Monetary Contributions and Receipts during this reporting period <i>(Add and enter amount totals from Boxes 1, 2, 3 and 4; also enter this amount on Page 1, Report Cover Page, Item B)</i>		\$	0

**PART A**  
**Contributions Received From Political Committees**

**\$50.01 TO \$250.00**

Use this Part to itemize only contributions received from Political Committees  
with an aggregate value from \$50.01 TO \$250.00 in the reporting period.

<b>Filer Identification Number</b>		COMMITTEE TO ELECT JIM WINARSKI (CITY COUNCIL)							
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							Amount	
<b>Full Name of Contributing Committee</b>					<b>Date [MM/DD/YYYY]</b>		\$	
<b>House #</b>		<b>Street Address</b>		<b>Date [MM/DD/YYYY]</b>		\$		
<b>City</b>			<b>State</b>		<b>Zip Code</b>		\$	
<b>Full Name of Contributing Committee</b>					<b>Date [MM/DD/YYYY]</b>		\$	
<b>House #</b>		<b>Street Address</b>		<b>Date [MM/DD/YYYY]</b>		\$		
<b>City</b>			<b>State</b>		<b>Zip Code</b>		\$	
<b>Full Name of Contributing Committee</b>					<b>Date [MM/DD/YYYY]</b>		\$	
<b>House #</b>		<b>Street Address</b>		<b>Date [MM/DD/YYYY]</b>		\$		
<b>City</b>			<b>State</b>		<b>Zip Code</b>		\$	
<b>Full Name of Contributing Committee</b>					<b>Date [MM/DD/YYYY]</b>		\$	
<b>House #</b>		<b>Street Address</b>		<b>Date [MM/DD/YYYY]</b>		\$		
<b>City</b>			<b>State</b>		<b>Zip Code</b>		\$	
<b>Full Name of Contributing Committee</b>					<b>Date [MM/DD/YYYY]</b>		\$	
<b>House #</b>		<b>Street Address</b>		<b>Date [MM/DD/YYYY]</b>		\$		
<b>City</b>			<b>State</b>		<b>Zip Code</b>		\$	

**PART B**  
**All Other Contributions**

**\$50.01 TO \$250**

Use this Part to itemize all other contributions with an aggregate value from  
\$50.01 TO \$250 in the reporting period.

(Exclude contributions from political committees reported in Part A.)

<b>Filer Identification Number:</b>	COMMITTEE TO ELECT JIM WINARSKI (CITY COUNCIL)
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<b>Full Name of Contributor</b>					<b>Date [MM/DD/YYYY]</b>	\$	
<b>House #</b>		<b>Street Address</b>			<b>Date [MM/DD/YYYY]</b>	\$	
<b>City</b>		<b>State</b>		<b>Zip Code</b>	<b>Date [MM/DD/YYYY]</b>	\$	
<b>Full Name of Contributor</b>					<b>Date [MM/DD/YYYY]</b>	\$	
<b>House #</b>		<b>Street Address</b>			<b>Date [MM/DD/YYYY]</b>	\$	
<b>City</b>		<b>State</b>		<b>Zip Code</b>	<b>Date [MM/DD/YYYY]</b>	\$	
<b>Full Name of Contributor</b>					<b>Date [MM/DD/YYYY]</b>	\$	
<b>House #</b>		<b>Street Address</b>			<b>Date [MM/DD/YYYY]</b>	\$	
<b>City</b>		<b>State</b>		<b>Zip Code</b>	<b>Date [MM/DD/YYYY]</b>	\$	
<b>Full Name of Contributor</b>					<b>Date [MM/DD/YYYY]</b>	\$	
<b>House #</b>		<b>Street Address</b>			<b>Date [MM/DD/YYYY]</b>	\$	
<b>City</b>		<b>State</b>		<b>Zip Code</b>	<b>Date [MM/DD/YYYY]</b>	\$	
<b>Full Name of Contributor</b>					<b>Date [MM/DD/YYYY]</b>	\$	
<b>House #</b>		<b>Street Address</b>			<b>Date [MM/DD/YYYY]</b>	\$	
<b>City</b>		<b>State</b>		<b>Zip Code</b>	<b>Date [MM/DD/YYYY]</b>	\$	

**PART C**  
**Contributions Received From Political Committees**

**Over \$250.00**

Use this Part to itemize only contributions received from Political Committees  
with an aggregate value over \$250.00 in the reporting period.

<b>Filer Identification Number:</b>	COMMITTEE TO ELECT JIM WINARSKI (CITY COUNCIL)
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<b>Full Name of Contributing Committee</b>					<b>Date [MM/DD/YYYY]</b>	\$	
<b>House #</b>		<b>Street Address</b>			<b>Date [MM/DD/YYYY]</b>	\$	
<b>City</b>		<b>State</b>		<b>Zip Code</b>	<b>Date [MM/DD/YYYY]</b>	\$	
<b>Full Name of Contributing Committee</b>					<b>Date [MM/DD/YYYY]</b>	\$	
<b>House #</b>		<b>Street Address</b>			<b>Date [MM/DD/YYYY]</b>	\$	
<b>City</b>		<b>State</b>		<b>Zip Code</b>	<b>Date [MM/DD/YYYY]</b>	\$	
<b>Full Name of Contributing Committee</b>					<b>Date [MM/DD/YYYY]</b>	\$	
<b>House #</b>		<b>Street Address</b>			<b>Date [MM/DD/YYYY]</b>	\$	
<b>City</b>		<b>State</b>		<b>Zip Code</b>	<b>Date [MM/DD/YYYY]</b>	\$	
<b>Full Name of Contributing Committee</b>					<b>Date [MM/DD/YYYY]</b>	\$	
<b>House #</b>		<b>Street Address</b>			<b>Date [MM/DD/YYYY]</b>	\$	
<b>City</b>		<b>State</b>		<b>Zip Code</b>	<b>Date [MM/DD/YYYY]</b>	\$	
<b>Full Name of Contributing Committee</b>					<b>Date [MM/DD/YYYY]</b>	\$	
<b>House #</b>		<b>Street Address</b>			<b>Date [MM/DD/YYYY]</b>	\$	
<b>City</b>		<b>State</b>		<b>Zip Code</b>	<b>Date [MM/DD/YYYY]</b>	\$	
<b>Full Name of Contributing Committee</b>					<b>Date [MM/DD/YYYY]</b>	\$	
<b>House #</b>		<b>Street Address</b>			<b>Date [MM/DD/YYYY]</b>	\$	
<b>City</b>		<b>State</b>		<b>Zip Code</b>	<b>Date [MM/DD/YYYY]</b>	\$	

**PART D**  
**All Other Contributions**  
Over \$250.00

Use this Part to itemize all other contributions with an aggregate value over \$250.00 in the reporting period.  
(Exclude contributions from political committees reported in Part C)

<b>Filer Identification Number:</b>	COMMITTEE TO ELECT JIM WINARSKI (CITY COUNCIL)
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<b>Full Name of Contributor</b>					<b>Date [MM/DD/YYYY]</b>	\$	
<b>House #</b>		<b>Street Address</b>			<b>Date [MM/DD/YYYY]</b>	\$	
<b>City</b>		<b>State</b>		<b>Zip Code</b>	<b>Date [MM/DD/YYYY]</b>	\$	
<b>Employer Name</b>					<b>Occupation</b>		
<b>Employer Mailing Address / Principal Place of Business</b>							
<b>Full Name of Contributor</b>					<b>Date [MM/DD/YYYY]</b>	\$	
<b>House #</b>		<b>Street Address</b>			<b>Date [MM/DD/YYYY]</b>	\$	
<b>City</b>		<b>State</b>		<b>Zip Code</b>	<b>Date [MM/DD/YYYY]</b>	\$	
<b>Employer Name</b>					<b>Occupation</b>		
<b>Employer Mailing Address / Principal Place of Business</b>							
<b>Full Name of Contributor</b>					<b>Date [MM/DD/YYYY]</b>	\$	
<b>House #</b>		<b>Street Address</b>			<b>Date [MM/DD/YYYY]</b>	\$	
<b>City</b>		<b>State</b>		<b>Zip Code</b>	<b>Date [MM/DD/YYYY]</b>	\$	
<b>Employer Name</b>					<b>Occupation</b>		
<b>Employer Mailing Address / Principal Place of Business</b>							
<b>Full Name of Contributor</b>					<b>Date [MM/DD/YYYY]</b>	\$	
<b>House #</b>		<b>Street Address</b>			<b>Date [MM/DD/YYYY]</b>	\$	
<b>City</b>		<b>State</b>		<b>Zip Code</b>	<b>Date [MM/DD/YYYY]</b>	\$	
<b>Employer Name</b>					<b>Occupation</b>		
<b>Employer Mailing Address / Principal Place of Business</b>							

## PART E

## Other Receipts

REFUNDS, INTREST INCOME, RETURNED CHECKS, ETC.

Use this Part to report refunds received, interest earned, returned checks and prior expenditures that were returned to the filer.

Filer Identification Number:	COMMITTEE TO ELECT JIM WINARSKI (CITY COUNCIL)
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Full Name									
House #		Street Address							
City			State		Zip Code		Date [MM/DD/YYYY]	\$	
Receipt Description									
Full Name									
House #		Street Address							
City			State		Zip Code		Date [MM/DD/YYYY]	\$	
Receipt Description									
Full Name									
House #		Street Address							
City			State		Zip Code		Date [MM/DD/YYYY]	\$	
Receipt Description									
Full Name									
House #		Street Address							
City			State		Zip Code		Date [MM/DD/YYYY]	\$	
Receipt Description									
Full Name									
House #		Street Address							
City			State		Zip Code		Date [MM/DD/YYYY]	\$	
Receipt Description									
Full Name									
House #		Street Address							
City			State		Zip Code		Date [MM/DD/YYYY]	\$	
Receipt Description									

## SCHEDULE II

**IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECEIVED**

USE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THINGS DURING THE REPORTING PERIOD

## DETAILED SUMMARY PAGE

Filer Identification Number:

COMMITTEE TO ELECT JIM WINARSKI (CITY COUNCIL)

**1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED-VALUE OF \$50.00 OR LESS PER CONTRIBUTOR**

TOTAL for the reporting period

(1)

\$

**2. IN-KIND CONTRIBUTIONS RECEIVED-VALUE OF \$50.01 TO \$250.00 (FROM PART F)**

TOTAL for the reporting period

(2)

\$

**3. IN-KIND CONTRIBUTION RECEIVED-VALUE OVER \$250.00 (FROM PART G)**

TOTAL for the reporting period

(3)

\$

TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from boxes 1, 2, and 3; also enter on Page 1, Report Cover Page, Item F)

\$



SCHEDULE II  
PART F  
**In-Kind Contributions Received**  
VALUE OF \$50.01 TO \$250

<b>Filer Identification Number:</b>	COMMITTEE TO ELECT JIM WINARSKI (CITY COUNCIL)
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<b>Full Name of Contributor</b>					<b>Date [MM/DD/YYYY]</b>		\$	
<b>House #</b>		<b>Street Address</b>				<b>Date [MM/DD/YYYY]</b>	\$	
<b>City</b>		<b>State</b>		<b>Zip Code</b>		<b>Date [MM/DD/YYYY]</b>	\$	
<b>Description of Contribution</b>								
<b>Full Name of Contributor</b>					<b>Date [MM/DD/YYYY]</b>		\$	
<b>House #</b>		<b>Street Address</b>				<b>Date [MM/DD/YYYY]</b>	\$	
<b>City</b>		<b>State</b>		<b>Zip Code</b>		<b>Date [MM/DD/YYYY]</b>	\$	
<b>Description of Contribution</b>								
<b>Full Name of Contributor</b>					<b>Date [MM/DD/YYYY]</b>		\$	
<b>House #</b>		<b>Street Address</b>				<b>Date [MM/DD/YYYY]</b>	\$	
<b>City</b>		<b>State</b>		<b>Zip Code</b>		<b>Date [MM/DD/YYYY]</b>	\$	
<b>Description of Contribution</b>								
<b>Full Name of Contributor</b>					<b>Date [MM/DD/YYYY]</b>		\$	
<b>House #</b>		<b>Street Address</b>				<b>Date [MM/DD/YYYY]</b>	\$	
<b>City</b>		<b>State</b>		<b>Zip Code</b>		<b>Date [MM/DD/YYYY]</b>	\$	
<b>Description of Contribution</b>								

SCHEDULE II  
Part G  
**In-Kind Contributions Received**  
VALUE OVER \$250

<b>Filer Identification Number:</b>	COMMITTEE TO ELECT JIM WINARSKI (CITY COUNCIL)
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<b>Full Name of Contributor</b>					<b>Date [MM/DD/YYYY]</b>		\$	
<b>House #</b>		<b>Street Address</b>			<b>Date [MM/DD/YYYY]</b>		\$	
<b>City</b>		<b>State</b>		<b>Zip Code</b>		<b>Date [MM/DD/YYYY]</b>		\$
<b>Employer Name</b>					<b>Occupation</b>			
<b>Employer Mailing Address / Principal Place of Business</b>					<b>Description of Contribution</b>			
<b>Full Name of Contributor</b>					<b>Date [MM/DD/YYYY]</b>		\$	
<b>House #</b>		<b>Street Address</b>			<b>Date [MM/DD/YYYY]</b>		\$	
<b>City</b>		<b>State</b>		<b>Zip Code</b>		<b>Date [MM/DD/YYYY]</b>		\$
<b>Employer Name</b>					<b>Occupation</b>			
<b>Employer Mailing Address / Principal Place of Business</b>					<b>Description of Contribution</b>			
<b>Full Name of Contributor</b>					<b>Date [MM/DD/YYYY]</b>		\$	
<b>House #</b>		<b>Street Address</b>			<b>Date [MM/DD/YYYY]</b>		\$	
<b>City</b>		<b>State</b>		<b>Zip Code</b>		<b>Date [MM/DD/YYYY]</b>		\$
<b>Employer Name</b>					<b>Occupation</b>			
<b>Employer Mailing Address / Principal Place of Business</b>					<b>Description of Contribution</b>			
<b>Full Name of Contributor</b>					<b>Date [MM/DD/YYYY]</b>		\$	
<b>House #</b>		<b>Street Address</b>			<b>Date [MM/DD/YYYY]</b>		\$	
<b>City</b>		<b>State</b>		<b>Zip Code</b>		<b>Date [MM/DD/YYYY]</b>		\$
<b>Employer Name</b>					<b>Occupation</b>			
<b>Employer Mailing Address / Principal Place of Business</b>					<b>Description of Contribution</b>			

SCHEDULE III  
**Statement of Expenditures**

<b>Filer Identification Number:</b>	COMMITTEE TO ELECT JIM WINARSKI (CITY COUNCIL)
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<b>To Whom Paid</b>		HOLY TRINITY - ZABAWA				<b>Date [MM/DD/YYYY]</b>	\$	200.00
						07/25/2017		
<b>House #</b>	2220	<b>Street Address</b>	REED ST			<b>Description of Expenditure</b>		
<b>City</b>	ERIE	<b>State</b>	PA	<b>Zip Code</b>	16503	ADVERTISING		
<b>To Whom Paid</b>		CTE JOE SCHEMBER				<b>Date [MM/DD/YYYY]</b>	\$	150.00
						7/28/2017		
<b>House #</b>		<b>Street Address</b>	PO BOX 927			<b>Description of Expenditure</b>		
<b>City</b>	ERIE	<b>State</b>	PA	<b>Zip Code</b>	16512			
<b>To Whom Paid</b>		GIUSEPPE MAZZINI CIVIC ASSOC				<b>Date [MM/DD/YYYY]</b>	\$	140.00
						9/15/2017		
<b>House #</b>	601	<b>Street Address</b>	PIN OAK DR			<b>Description of Expenditure</b>		
<b>City</b>	ERIE	<b>State</b>	PA	<b>Zip Code</b>	16504			
<b>To Whom Paid</b>		DESANTIS SIGNS				<b>Date [MM/DD/YYYY]</b>	\$	400.00
						9/27/1965		
<b>House #</b>	540	<b>Street Address</b>	W 18TH ST			<b>Description of Expenditure</b>		
<b>City</b>	ERIE	<b>State</b>	PA	<b>Zip Code</b>	16502	SIGNS		
<b>To Whom Paid</b>		CTE JOE SCHEMBER				<b>Date [MM/DD/YYYY]</b>	\$	150.00
						10/15/2017		
<b>House #</b>		<b>Street Address</b>	PO BOX 927			<b>Description of Expenditure</b>		
<b>City</b>	ERIE	<b>State</b>	PA	<b>Zip Code</b>	16512			
<b>To Whom Paid</b>						<b>Date [MM/DD/YYYY]</b>	\$	
<b>House #</b>		<b>Street Address</b>				<b>Description of Expenditure</b>		
<b>City</b>		<b>State</b>		<b>Zip Code</b>				
<b>To Whom Paid</b>						<b>Date [MM/DD/YYYY]</b>	\$	
<b>House #</b>		<b>Street Address</b>				<b>Description of Expenditure</b>		
<b>City</b>		<b>State</b>		<b>Zip Code</b>				
<b>To Whom Paid</b>						<b>Date [MM/DD/YYYY]</b>	\$	
<b>House #</b>		<b>Street Address</b>				<b>Description of Expenditure</b>		
<b>City</b>		<b>State</b>		<b>Zip Code</b>				

**SCHEDULE IV**

**Statement of Unpaid Debts**

Use this Section to itemize all unpaid debts and obligations which are outstanding at the end of the reporting period.

Filer Identification Number:	COMMITTEE TO ELECT JIM WINARSKI (CITY COUNCIL)
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<b>Name of Creditor</b>						<b>Outstanding Balance of Debt</b>	
<b>House #</b>		<b>Street Address</b>		<b>DATE DEBT INCURRED [MM/DD/YYYY]</b>		\$	
<b>City</b>			<b>State</b>		<b>Zip Code</b>		
<b>Description of Debt</b>							

  

<b>Name of Creditor</b>						<b>Outstanding Balance of Debt</b>	
<b>House #</b>		<b>Street Address</b>		<b>DATE DEBT INCURRED [MM/DD/YYYY]</b>		\$	
<b>City</b>			<b>State</b>		<b>Zip Code</b>		
<b>Description of Debt</b>							

  

<b>Name of Creditor</b>						<b>Outstanding Balance of Debt</b>	
<b>House #</b>		<b>Street Address</b>		<b>DATE DEBT INCURRED [MM/DD/YYYY]</b>		\$	
<b>City</b>			<b>State</b>		<b>Zip Code</b>		
<b>Description of Debt</b>							

  

<b>Name of Creditor</b>						<b>Outstanding Balance of Debt</b>	
<b>House #</b>		<b>Street Address</b>		<b>DATE DEBT INCURRED [MM/DD/YYYY]</b>		\$	
<b>City</b>			<b>State</b>		<b>Zip Code</b>		
<b>Description of Debt</b>							

  

<b>Name of Creditor</b>						<b>Outstanding Balance of Debt</b>	
<b>House #</b>		<b>Street Address</b>		<b>DATE DEBT INCURRED [MM/DD/YYYY]</b>		\$	
<b>City</b>			<b>State</b>		<b>Zip Code</b>		
<b>Description of Debt</b>							